

City of Las Vegas

1700 N. Grand Ave., Las Vegas, New Mexico 87701 (505)454.1401 · fax (505) 425.7335 www.lasvegasnm.gov

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS PLEASE READ FIRST Applicants are considered for all positions without regard to race, color, religion, Complete this application in ink. sex, national origin, ancestry, age, sexual orientation, gender identity, marital or You must specify the position you veteran status, or the presence of a medical condition or disability (unless a bona are applying for. fide occupational qualification for position). Resumes are not accepted in lieu of applications. Each position you apply for requires Position Applied a separate application. Copies of your application are acceptable. Each Are you available to work (check all that apply) must be clear, have an original signature and correct job title and Full-Time Part-Time Temporary/Seasonal required attachments. Applications and attachments become official property of the City of Las Vegas and cannot be returned after being submitted. (Last) Read the job posting to assure you (Middle) Mailing Address Number meet all of the minimum qualifications set forth for the City, State, Zip Physical Address_ available position. Street If high school/GED, college City, State, Zip Telephone (Home) () _____ (Cell) () ____ education, or certification is required, either attached a copy of your Have you ever used a different name for school or employment? Yes diploma, degree, transcripts or re-No 🗆 quired certifications to application. If so, what name(s): If additional space is needed for completion of answers you may Have you ever been employed by the City of Las Vegas? attach a separate sheet of paper. Yes 🗆 No 🗆 Your completed application is the If yes, give date(s) and reason for leaving: primary source of information used in making selection decisions. Does the City of Las Vegas employ any relatives of yours? Carefully complete each experience Yes 🔲 № П block describing your work or Name ___ volunteer experience. Your Relationship _____ qualifications for a position will depend on your description of previous experience and its relevance Are you eligible to work in the United States? to the position you are seeking. Yes 🔲 No □ (If selected, proof of eligibility will be required) Applications must be submitted to the Human Resource Department by deadline posted to be considered for Do you possess a valid Driver's License the vacant position. Yes 🔲 No 🗆 Applications will be reviewed and State _____ Class ____ License # forwarded to the Department Director. For Human Resource Use Only All applications will be kept on file for six (6) months after it is received. Record of Receipt

Received by:

High School Graduate / GED Certification? Yes No If no, indicate grade completed Vocational / Technical: Hours Completed: School-Major Field: Business College: Hours Completed:___ Major Field: College or University - Name: UNDERGRADUATE GRADUATE School(s) School(s) Major Field(s) Major Field(s) Hours Completed: Hours Completed: Degree(s) Received: (Copies of diploma and/or transcripts may be requested upon offer of employment) 1. License/Certificate Issued by: Field / Trade / Specialization: Lic. / Cert. Number: Issue Date: Exp. Date: 2. License/Certificate Issued by: Field / Trade / Specialization: Lic. / Cert. Number: Issue Date: Exp. Date:

APPLICANT DATA RECORD.

In order to help us comply with Equal Employment Opportunity record keeping, reporting and other legal requirements, we ask that you please fill out the information requested below. This is not required, the information will not be used in the employment process, but we would appreciate your cooperation. If you choose not to provide the information you will still be considered for the position you applied for.

Sex: Male Female Veteram of the Vietnam-era mean May 7, 1975 who (i) served on active duty for (ii) was discharged or released from active duty	is a veteran, any part of whose active military,	Yes (Fill out attachme naval, or air service, was during the pe narged or released there from with other	
Race/Ethnic Group (Choose the ethnic group with wh. White Black C	ich you most closely identify and Hispanic	mark the box provided.	Asian or Pacific Islander

M ORK EXPERIENCE

List your last four (4) employers, assignments or volunteer activities that would be relevant to this position; starting with the most recent, including military experience. Explain any gaps in employment in the COMMENTS section. You may submit a resume, but a resume is not a substitute for this application.

Employer:	Telephone:	Dates Employed:
Address:		From:
Job Title:		To:
Immediate Supervisor and Title:		Hourly Rate / Salary:
Reason for Leaving:	100 To	Start:
Summarize work performed/job responsibilities:		Final:
		May we contact for reference
		J Yes I No
Employer:	Telephone:	Dates Employed:
Address:		From:
Job Title:		To:
Immediate Supervisor and Title:		Hourly Rate / Salary:
Reason for Leaving:		Start:
Summarize work performed/job responsibilities:		Final:
		May we contact for reference?
		□ Yes □ No
Employer:	Telephone:	Dates Employed:
Address:		From:
ob Title:		To:
nmediate Supervisor and Title:		Hourly Rate / Salary:
eason for Leaving:		Start:
mmarize work performed/job responsibilities:		Final:
		May we contact for reference?
		□ Yes ¬ No
nployer:	Telephone:	Dates Employed:
dress:		From:
Title:		To:
mediate Supervisor and Title:		Hourly Rate / Salary:
son for Leaving:		Stan:
unarize work performed/job responsibilities:		Final:
		May we contact for reference?
Air .		⊊ Yes □ No

ACKNOWLEDGEMENT

PLEASE READ AND SIGN THE STATEMENTS BELOW (Unsigned applications will be rejected and not be considered):

The facts set forth in my application for employment are true and complete, to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. I authorize any of my previous employers, schools, or persons named as references to give any information regarding employment or educational record. I agree that the City of Las Vegas and my previous employers shall not be held liable in any respect if a job offer is not extended, is withdrawn, or my employment is terminated because of false statements, omissions or answers made by me on this application.

Applicant Signature:	Date://
	DOB://
PRE-EMPLOYMENT SCREENING ACKNOWLEDGMENT AND AGREEMENT	
By my signature below, I, realize and understant with the City of Las Vegas, I will be required to submit to pre-employment screenings Las Vegas will pay for this drug screening.	and that if considered for employ- as a condition of hire. The City of
My signature below also serves to acknowledge and agree to the fact that if I receive with the City of Las Vegas, and accept it, one factor that must be met PRIOR to a <u>final</u> offer successful completion of all pre-employment screenings. If successful completion of a pretained, I understand I <u>will not</u> be eligible for hire with the City of Las Vegas.	
Applicant Signature:	Date://
	DOB://
AUTHORIZATION FOR RELFASE OF CRIMINAL ARRESTS AND DRIVING REC	ORD .
I authorize the City of Las Vegas to obtain criminal arrests and driving record informat ment agencies, courts of law, and motor vehicle departments, of any state in which I reside (or	tion about me from law enforce- have resided).
Applicant Signature:	Date://
	DOB:/



CITY OF LAS VEGAS JOB APPLICATION VETERAN'S CERTIFICATION FORM

! NAM	E:	Position Title:		
ımpıem	nt to City of Las Vegas Resoluented a Veterans' Hiring Initiative ations for city employment to obta	ution No. 13-40, the City of Las Vegas Human Resources Depe policy in order to provide opportunities for veterans who meet or a in City employment.	exceed the	HRD) ha minimu
nonorat	rpose of this form is to allow job le discharge from the military or fully completed basic training.	b applicants the opportunity to identify and certify that they are a to verify that the job applicant is a member of the National Guard	veteran who Reserve	ho has a who ha
qebartın dantırıcı	mons on a recruitment announcem	an AND if it is determined that the veteran applicant meets or extent, the HRD will identify the veteran applicant on the list of eligibilities. Once certified and identified by HRD the department/division	le applican	sta for the
snail be	nired for the position being app	as Vegas Resolution No. 13-40; the Governing Body does not guar- plied for, only that the veteran will be given an interview; and, it is ing agreement that is currently in place with the City of Las Vegas.	antee that does not	a veteran
To iden training,	tify yourself as a veteran or a answer the following questions:	member of the National Guard or Reserve who has successful	y complet	led basic
			<u>Yes</u>	No
1. 2. 3.	Did you receive an honorable	ed States Military on Active, Guard or Reserve status?	0	0
٥.	training?	onal Guard or Reserve who has successfully completed basic	0	0
To certify Guard or	your veteran status please attac Reserve enlistment.	ch a copy of your "DD214" or "DD215" form, and or proof of cu	rent Activ	re,
Please en responsib	sure your application clearly ind ilities.	licates your military experience and identify any education, job d	uties and/o	r
Signatu	re	Date		
Print Nar	ne			

CITY OF LAS VEGAS POLICE DEPARTMENT

EMPLOYMENT APPLICATION PACKET

ALL REQUESTED ITEMS MUST BE SUBMITTED WITH PACKET OR IT MAY NOT BE ACCEPTED

LAS VEGAS POLICE DEPARTMENT BENEFIT INFORMATION

The City of Las Vegas, New Mexico provides the following benefits for its Law Enforcement Personnel.

- 1. Paid Vacation
- 2. Paid Sick Leave
- 3. Over-time Pay
- 4. Clothing Allowance
- 5. 11 1/2 Days Paid Holidays Per Year
- 6. 1 Paid Personal Holiday Per Year
- 7. Medical Insurance Plan(s)
- 8. Twenty-Five Year Retirement (Police Officer)
- 9. Thirty Year Retirement (Civilian Staff)

The Las Vegas Police Department provides a take home patrol vehicle for each officer along with related equipment.

The starting salaries for all Las Vegas Police Department positions are available upon request.

Any questions concerning these benefits or positions can be directed to the Las Vegas Police Department Training/Recruiting/Hiring Division at (505)426-3144 Monday through Friday from 8:00am to 5:00pm.

Waiver of "Due Process of Law" Rights

I understand that the City of Las Vegas Police Department provides the right to due process hearings in regard to issues that may have effected separation from the department and/or my decision to resign. I understand that information regarding such issues and my employment history may be released to prospective employers. In full knowledge of such opportunity for such due process, I hereby waive such rights.

s Name	(Printed)
	ure (Date)

PERSONAL HISTORY STATEMENT INSTRUCTIONS

TO ALL APPLICANTS

The attached "Personal History Statement" is an important document in the processing of your application to become an employee of the City of Las Vegas Police Department. If this form is not completed properly and legibly your application will not be accepted but will be returned to you for correction and resubmission. It is your responsibility to read each question carefully and answer each one fully and truthfully. All information furnished must be correct and complete. If the background investigators turn up information that you omitted it could result in your elimination from the process.

The attached "Personal History Statement" and other forms must be attached to the Employment Application Packet and turned in by the deadline set for applications. Candidates who need more time to locate documents such as a; birth certificate, high school diploma, Form DD, etc. must still complete and submit the "Personal History Statement" with the application. The City of Las Vegas Police Department will accept other supporting documents at a later time if proper notice and a target date are given.

The "Personal History Statement" will be reviewed and evaluated by a background investigator. You are to follow directions carefully. Any intent to deceive or to falsify facts or to omit pertinent information may be cause to withdraw your application.

Please note that neatness in writing, punctuation, spelling, the ability to follow directions, etc. is evaluated as part of the process.

LAS VEGAS POLICE DEPARTMENT PERSONAL HISTORY STATEMENT

SOCIAL SECURITY NUMBER: __-_ DATE:

	GENERAL INSTRUCTIONS
SELE	"PERSONAL HISTORY STATEMENT" IS AN IMPORTANT DOCUMENT IN THE ECTION PROCESS. IF THIS FORM IS NOT COMPLETED PROPERLY AND IBLY YOUR APPLICATION CANNOT BE PROCESSED. <u>USE BLACK INK ONLY.</u>
DOE:	D PRINT AND/OR TYPE AN ANSWER TO EVERY QUESTION. IF THE QUESTION S NOT APPLY TO YOU, SO INDICATE WITH N/A. IF THE SPACE AVAILABLE IS IFFICIENT WITH THE NUMBER OF THE REFERENCED BLOCK USE ADDITIONAL ES. COMPLETENESS IS IMPORTANT.
SUBJ INFO	NOT MISSTATE OR OMIT MATERIAL FACTS SINCE YOUR STATEMENTS ARE ECT TO VERIFICATION AND ANY ATTEMPT TO DECEIVE OR FALSIFY RMATION OR TO OMIT PERTINENT INFORMATION WILL BE CAUSE FOR R ELIMINATION FROM THE SELECTION PROCESS.
	"PERSONAL HISTORY STATEMENT" MUST BE RETURNED WITH YOUR ICATION.
1.	LEGAL NAME: LAST FIRST MIDDLE
2.	LAST FIRST MIDDLE OTHER NAMES USED:
3.	RESIDENCE ADDRESS:
4.	MAILING ADDRESS:
5.	DATE OF BIRTH: PLACE OF BIRTH:
6.	ARE YOU A CITIZEN BY BIRTH OR NATURALIZED CITIZEN?
7.	SEX: MFAGE:WGHT:HGT:HAIR COLOR:
8.	EYE COLOR:
9.	NAME OF PERSON WITH WHOM YOU LIVE:RELATIONSHIP:

CHRONOLOGICAL ORDER (PRESENT TO PAST) LIST EACH AND EVERY PLACE YOU 10. HAVE RESIDED IN THE LAST TEN YEARS. Α. MO/YR TO MO/YR **ADDRESS** PHONE # NAME OF PERSON LIVED WITH, RELATIONSHIP, CURRENT ADDRESS PHONE# NAME OF COMPANY/PERSON BUYING/LEASING/RENTING FROM AND THEIR CURRENT ADDRESS AND PHONE NUMBER B. MO/YR TO MO/YR ADDRESS PHONE # NAME OF PERSON LIVED WITH, RELATIONSHIP, CURRENT ADDRESS PHONE# NAME OF COMPANY/PERSON BUYING/LEASING/RENTING FROM AND THEIR CURRENT ADDRESS AND PHONE NUMBER C. MO/YR TO MO/YR **ADDRESS** PHONE # NAME OF PERSON LIVED WITH, RELATIONSHIP, CURRENT ADDRESS PHONE# NAME OF COMPANY/PERSON BUYING/LEASING/RENTING FROM AND THEIR CURRENT ADDRESS AND PHONE NUMBER D. MO/YR TO MO/YR ADDRESS PHONE # NAME OF PERSON LIVED WITH, RELATIONSHIP, CURRENT ADDRESS PHONE# NAME OF COMPANY/PERSON BUYING/LEASING/RENTING FROM AND THEIR CURRENT ADDRESS AND PHONE NUMBER E. MO/YR TO MO/YR ADDRESS PHONE # NAME OF PERSON LIVED WITH, RELATIONSHIP, CURRENT ADDRESS PHONE# NAME OF COMPANY/PERSON BUYING/LEASING/RENTING FROM AND THEIR CURRENT

ADDRESS AND PHONE NUMBER

ARRESTS, SUMMONS, ETC. (ANSWER ALL QUESTIONS)

	issued.	ctading Juvenite arrests,	and any misdemeanor citation	ns you have t
	Violation	_		
DATE	Actual or Charge (Specify)	Location (City State)	Court Disposition or Sentence	Police Agency
13.	List ALL traffic violations Violation	including parking, warn	ing and dismissed citations:	and the state of t
DATE	Actual or Charge (Specify)	Location (City State)	Court Disposition or Sentence	Police Agency
14. DATE	List <u>ALL</u> traffic accidents Location (in which you were the dr Street, City, State)	iver. Police Agency	
5.	Were you ever a plaintiff, d	efendant, petitioner, or re	espondent in a civil proceedin	g, including
6. ATE	List <u>ALL</u> civil actions in wi Action or Proceeding I	nich you were a party or Plaintiff, Defend Petitioner, Respondent	ant, Cou	

SUBVERSIVE AFFILIATIONS

17.				party or organization, Political or of the government of the United
- 2	States or of th	e State of New Mex	ico by force or violence or oth	er unlawful means.
	Yes		yes, attach a separate sheet	
18.	Were you eve	r terminated/fired, g	iven the option of resigning in	lieu of termination or quit before
	being fired?	Yes N	·	
Emp	loyer	Complete Addres	Date Supervisor	Reason
19.	Yes		isciplinary action in conne	ection with any employment?
Detail	s:			
20.	Have you prevother law enfo	riously submitted an	application to the City of Lacr corrections agency? Yes	ns Vegas Police Department, any No If yes give details
Date A	Applied	Organization	Complete Address	Phone #
21.	Were you ever			agency or corrections agency?

EMPLOYMENT

Month and year-From:	To:	Position Held:
Employer:		Employer's Phone #:
Employer's Address:		Reason for Leaving:
Immediate Supervisor:		Brief Description of Duties:
Month and year-From:	To:	Position Held:
Employer:		Employer's Phone #:
Employer's Address:		Reason for Leaving:
Immediate Supervisor:		Brief Description of Duties:
Month and year-From:	To:	Position Held:
Employer:		Employer's Phone #:
Employer's Address:		Reason for Leaving:
Immediate Supervisor:		Brief Description of Duties:
Month and year-From:	To:	Position Held:
Employer:		Employer's Phone #:
Employer's Address:		Reason for Leaving:
Immediate Supervisor:		Brief Description of Duties:
Month and year-From:	To:	Position Held:
Employer:		Employer's Phone #:
Employer's Address:		Reason for Leaving:
Immediate Supervisor:		Brief Description of Duties:

SOCIAL STATUS

List below ever	ry child boı	m to you, ad	opted, step, foster	or other depen	dents.
Name	_	ate of Birth	Place of Birth		whom and wher es child reside
			· · · · · · · · · · · · · · · · · · ·		
Are you now su	innorting a	II children/de	ependents listed ab	ove?	
			explain:		
			nity suit as a petiti , explain:		
		MI	LITARY SERV	'ICE	
Have you ever		n the arme	d forces of the		s or any other
Yes	No(n the arme	d forces of the	United States	·
Yes Which branch o List period of co	No(f Service? ontinuous se	n the arme (If no, go to	d forces of the question #35) each branch of Ar	United States	-
Yes Which branch o List period of co From From	No(f Service? ontinuous s	n the arme (If no, go to e	d forces of the question #35) each branch of Ar Rank Rank	United States	-
Yes Which branch of List period of co From From From	No(f Service? ontinuous s	n the arme (If no, go to ervice under To To	d forces of the question #35) each branch of Ar Rank Rank Rank	United States	- -
Yes Which branch of List period of co From From From	No(f Service? ontinuous s	n the arme (If no, go to ervice under To To	d forces of the question #35) each branch of Ar Rank Rank	United States	- -
Yes Which branch of List period of co From From From From	No(f Service? ontinuous s	n the arme (If no, go to o	d forces of the question #35) each branch of Ar Rank Rank Rank	United States	- - -
Yes Which branch of List period of co From From From From	No(f Service? ontinuous s	n the arme (If no, go to o	d forces of the question #35) each branch of Ar Rank Rank Rank Rank	United States	- - - -
Yes Which branch of confrom From From From What type of Dis	No(f Service? ontinuous services scharge (ho	ervice under To To Donorable, dislocated, tried o	d forces of the question #35) each branch of ArRankRankRank honorable, general	United States med Forces. , medical, etc.)	summary court, c
Yes Which branch of confrom From From From What type of Dis	No(f Service? ontinuous services scharge (horseourt marshounishment	ervice under To To To Onorable, disl naled, tried o , Article 15,	d forces of the question #35) each branch of Ar Rank Rank Rank Ank honorable, general f charges, been the or any other type of	United States med Forces. , medical, etc.)	summary court, c

Are you currently	in any Reserve or National Gua	rd? YesNo
Branch	Rank	
	for the Military Draft when you t	urned eighteen?
	GENE	RAL
What college degr	ree or professional license(s) do	you posses?
Do you have a hig	gh school diploma or a GED?	
List below the M have attended? Do	iddle School(s), High School(s) not list Military School(s). Star	
Name of School	Location	Dates Attended Mo./Yr To Mo./Yr.
List memberships member of.	of all social, labor or fraternal o	
	of all social, labor or fraternal o	rganizations you belonged to or are contact Pe

Cre	ditor	Phone	Address	Date	Amount	Original Balance	Month! Payme
							2 1
Note:	<u>. </u>		to provide a cui				
			r co-signer or			No	
Have	you eve	r been bon	ided? Yes_		No	*	
Reas	on					and Address)	Phone #
				•	•	•	
Have							
Have If yes	you ever	been refu	ised a bond?	Yes			-30
If yes	you ever	been refu	sed a bond?	Yes		No	
If yes List t	you ever s, explain he details Class	been refu	ised a bond?	Yes	?	No	
If yes List t	you ever s, explain he details Class	on the fold	ised a bond?	Yes	Numbe	No	
If yes List t	you ever s, explain he details Class Chauf CDL	on the fol D Drivers feur's Lice	llowing licens License State	Yes	Numbe	No	
List t	he details Class Chauf CDL Other	on the fol D Drivers	llowing licens License State	Yes Ses: State State	Numbe	r	
List t	you ever the details Class Chauf CDL Other you ever	on the fol D Drivers feur's Lice	llowing licens License State	Yes Ses: State State by other s	Numbe	No	
List t	you ever s, explain he details Class Chauf CDL Other_	on the fol D Drivers feur's Lice	llowing licens License State ense State	Yesses: StateState! by other s	Numbe	r	
List t	you ever s, explain he details Class Chauf CDL Other_	on the fol D Drivers feur's Lice	llowing licens License State	Yesses: StateState! by other s	Numbe	r	
List t List t Have State State	you ever s, explain he details Class Chauf CDL Other_ you ever	on the fold Diversifeur's Lice	llowing licens License State ense State dicenses issued Date Date	Yes Ses: State State_ Or revoked	Numbe Numbe states? Yes	No r r Number Number sNo	

Name	Address	Phone	Relationship	Living/Deceased
	er been fingerpri			
wnen	Wh	ere	Purpose	
Mileli		ere	rurpose	
	ty or criminal re	cord, etc.? yes, explain		ection with an investig
Yes Do you know	NoIf	cord, etc.? yes, explain nat would disqu	alify you from the sel	ection process or prev
Yes Do you know	NoIfy w of anything the	yes, explain nat would disquar duties as a Po	alify you from the sel	ection process or prever? YesNo
Yes Do you know from the full of yes, explain the full of the	NoIf you of anything the discharge of you nIf you to submit a	eord, etc.? yes, explain nat would disquar duties as a Po	alify you from the sel lice Cadet/Police Office the Police Departmen	ection process or preveer? YesNo
Yes Do you know from the full if yes, explain what inspired	NoIf you of anything the discharge of you nIf you to submit a	eord, etc.? yes, explain nat would disquar duties as a Po	alify you from the sel lice Cadet/Police Office the Police Departmen	ection process or prever? YesNo

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS PERSONAL HISTORY STATEMENT IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I FURTHER UNDERSTAND THAT ANY MISREPRESENTATION, OMISSIONS OR FALSIFICATIONS MAY BE DEEMED SUFFICIENT CAUSE FOR REJECTION FROM THE SELECTION PROCESS OR TERMINATION OF FUTURE EMPLOYMENT.

IN WITN	ESS WHE	REOF, I	HAVE EXECUTED THIS	-	AT DAY OF	20
	(City, St	ate, Cou		ON THE	DAT OF	, 20
Al	PPLICAN	T'S SI	GNATURE			
SUBSCRI	BED AND	SWOR	N BEFORE ME THIS	DAY OF_		, 20
NOTARY	PUBLIC			COUNTY	AND STATE	
My comm	ission exp	ires				
NOTE:	The f	ollowing	items must accompany this que	stionnaire:		
	0		An original copy of Sta	te Birth Certi	ficate	
			A copy of Social Securi	ity card (front	and back)	
			An original copy of Hig	th School Dip	loma or GED	
			A copy of High School	transcripts (o	fficial copy)	
			An original copy of Col	lege transcrip	ts	
			Two forms of identifica	tion: Drivers	License, self photo	o, etc.
			A copy of Military DD-	214(long form	n)	
			A copy of Selective Ser	vice Registrat	ion or Military ID	ı

If you do not have one or more of the above documents with you for your interview when your Personal History Statement is reviewed, you must provide the Recruiting Section Interviewer with a clear understanding of why you failed to provide the documents and a specific time when you will be able to provide the documents. The background investigation process of this selection cannot be completed without these documents in your file.

LAS VEGAS POLICE DEPARTMENT RECRUITING AND SELECTION

Pre-Investigation Questionnaire

DIRECTIONS: The Las Vegas Police Department has developed a comprehensive and intense selection process for Police Department applicants. This selection process will consume a great deal of your time as well as expense and effort for the Las Vegas Police Department. This Questionnaire is designed to acquaint you with certain standards, which MAY or MAY NOT DIQUALIFY YOU AS A CANDIDATE DURING THIS SELECTION PROCESS. This Questionnaire is designed to save you time, money and energy early on in the selection process. Your truthful responses to the following questions and the following interview with your Recruiting Officer will help you to evaluate your chances and ability in continuing on in the Selection Process. Recruiting of all candidates is done without regard to race, color, national origin, ancestry, sex, age, religion or disability, in the provision of services, programs or activities. The City of Las Vegas is an Equal Opportunity/Reasonable Accommodation Employer.

All subjects on this application form are subject to verification by an intense background investigation. Deliberate inaccuracies, incomplete statements, minimizations, rationalizations, omissions and/or misstatements must be corrected. If they are not, it may result in your disqualification from the selection process or termination from employment if hired.

It is to your advantage to respond honestly and openly to all of the following questions. Any negative factor in your background will be evaluated in terms of circumstances and facts surrounding the Police Department and its degree of relevance to the job. The Las Vegas Police Department is looking for mature, honest people who can admit their mistakes and discuss those mistakes, honestly. For example, being fired from a job or having an arrest record is not, in itself grounds for disqualification in many cases. During your interview, your background Investigator will inquire into facts surrounding the event. An evaluation will be made of the relevance of the facts to the requirements and guidelines of the job. It is your responsibility to be truthful. A negative factor in your background may not terminate you from the application process, being dishonest about that negative factor will. Be honest. If you feel some event in your background is indirectly related to your application, even though it is not specifically listed, then disclose it. Save yourself a great deal of time, money, energy and effort of continuing on in the process.

You will need to write a short narrative to fully EXPLAIN EACH YES ANSWER. Make sure your writing is clear just as you would in a normal police report. In your narrative answer the relevant questions of Who, What, When, Where, Why and How Often as each question requires. Write your narrative in **BLACK INK ONLY**. Again, IT IS IMPORTANT THAT YOUR ANSWERS BE **HONEST**, AS THE INFORMATION WILL BE VARIFIED BY THE EXTENSIVE BACKGROUND INVESTIGATION.

Make sure you include sufficient detail in your report that your background Investigator can read and fully understand the circumstances, what happened, when and why.

Reference your DRUG and SUBSTANCE EXPERIMENTATION. Make sure you list the dates first used. Don't rationalize or minimize the facts. If you can't remember the exact dates, put down the month and year to the best of your ability.

If you need more room to write on any given page, continue writing on the bottom lines of the next page, etc.

***It is your responsibility to ask for clarification of any question or word that is not perfectly clear and understandable to you. Unless otherwise stated, each question refers to anytime, any reason, any place, anywhere at any age, in any jurisdiction, in civilian and military life, domestic or abroad or on any Military Installation Base or Federal Land. IT IS YOUR RESPONSIBILITY TO BE HONEST AND TRUTHFUL!

Please fill out this form in **BLACK INK** only. It is your responsibility to write clearly and legibly. If we cannot read it, the public will not be able to read your police report either. Remember, neatness in writing, grammar, punctuation, spelling, clarity and ability to follow written instructions are all evaluated as part of the selection process. There is no set time limit to complete this questionnaire however, the sooner the better.

PERSONAL APPLICANT DATA

Socia	1 Secur	ity Number: Date Of Birth:		
Drive	rs Lice	nse Number:		
Appli	cant Na	ame:Other Names Used		
Physi	cal Add	dress Mailing Address		
City/S	State/Zi	p Code:		
1.	•	ou have prior Law Enforcement experience? s, complete the following questions:	Yes	No
	a)	Are you currently a certified Police Officer?	Yes	No
	b)	Have you ever been a certified Law Enforcement Officer in New Mexico?	Yes	No
	c)	Have you ever been a Military Officer in any branch of Military Service?	Yes	No
	d)	If you have any prior Law Enforcement experience, have you ever be suspended, sued, relieved of duty, or received written reprimand for any reason		not ed No
	e)	Have you ever fired your duty weapon, other than for practice or for purposes, in the line of duty?	qualific Yes	cation No
	answer below	red Yes to any of the prior Law Enforcement questions, please briefly explan:	ain eacl) Yes
RESPO	ONSE?	TO QUESTION:		
#	·-			
#	·			
#	·			
#	·			
#	·			
#	·		_	
#	·			
#	·			

۷.		you have military experience?	Yes	No
	If ye	es, complete following questions:		
	a)	Have you ever been a member of any branch of the Armed Forces,		
	·	Either currently or in the past, active, inactive, Reserve, National Gui	ard. etc.?	
			Yes	No
		Which Branch:		
		Date(s):		
		Total time in the Military: Date of Discharge	D:	
		In Civilian terms, what was your Military specialty?		
	b)	Did you ever fail any term of condition of your enlistment for any rea	son?	
			Yes	No
	c)	Type of Discharge received: (Circle One)		
		<u> </u>	HONORABI	JIC.
		While in the Military were you ever declared AWOL?	Yes	No
		While in the Military, did you ever receive any punishment that reprimand, demotion, suspension, reduction in rank, being relieved of confinement? (This includes such things as Article 15's, Page 1 Company Punishment, Court Marshal's Written Counseling Statemen	duty, loss of l's Captain	pay or
		_	Yes	No
here:	ONSE 7	nswered Yes to any of the prior Military questions please briefly explain TO QUESTION:	n die encums	mices
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EVENT HISTORY SECTION

Please answer YES or NO to each of the following questions. Each question is asking you if at anytime, anyplace, anywhere, at any age, for any reason, either in civilian life or in military life, domestic or abroad, have you ever committed any of the following acts. It does not matter if the act was detected, undetected, was reported or unreported, investigated, discovered or if anyone was questioned or arrested. The question is simply asking you if you have ever committed this particular act.

It is to your benefit to be **HONEST**. Examples refer to things that have occurred at any time other than in the line of duty for the job you were in at that time. We expect everyone to answer all of the questions honestly. This selection is also designed to measure your reading and comprehension ability, vocabulary, and your ability to follow written directions correctly. Each of the following questions is asking you if you have ever, at anytime, anywhere in your life, whether caught or not, have you:

CIRLE EITHER Y or N

Y-YES

N-NO

Drug Use and Experimentation

1. Ever experimented at any time, even once, with any of the below listed substances for any reason. This includes any and all use including experimentation, curiosity, peer pressure, and any one time use whether you felt the effects of the substance or not, inhaled or not. Answer each of the questions truthfully. Your drug information will be verified by the background investigation. Do not minimize or rationalize the facts. If you don't know the exact date put down the approximate month and year as best as you can recall.

a	. Cocaine, crack, rock, snow, blow, etc.?		Y	N
	Date first used:	Last used:		
b	. Amphetamines: uppers, speed, meth, crank, e			N
	Date first used:	Last used:		
C	. Heroin, black tar heroin, horse, H, etc.?		Y	N
	Date first used:	Last used:		
d	. Opium, morphine?		Υ	N
	Date first used:	Last used:		
e.	. PCP, angel dust?			N
	Date first used:	Last used:		
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	f. Marijuana, THC, pot, grass, weed, etc.?	_	N
	Date first used:Last used:		
	g. Hash, hash oil, hashish, etc.?		N
	Date first used:Last used:		
	h. Mushrooms, peyote?	Y	N
	Date first used:Last used:		
	i. Steroids: injected or oral?	Y	N
	Date first used:Last used:		
	j. Barbiturates, downers, etc.?		N
	Date first used:Last used:		
	k. LSD, blotter acid, any other hallucinogenic drugs not listed?		N
	Date first used:Last used:		
	Total number of single infections or pills taken:		
	1. Quaaludes, ecstasy, etc.?		N
	Date first used:Last used:		
	m. Inhaled any paint, glue, solvents, and gases for the sole purposes of getting high?		N
	Type used: Date first used: Last used:		
	n. Poppers, amityl nitrate, "Rush", etc. (inhaled)?	— _Y	N
	Date first used:Last used:	_	••
	o. Any other illegal substance not listed?	Y	N
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2.	Ever abused any prescription or over the counter type drugs, made out to you or anyone sole purpose of getting "high" or for its effects. Such things as Valium, Xanax, Codeine, Dilauude, Demerol, Drinking Listerine, mouthwash, cologne, etc?	Meth	
3.	Ever purchased any narcotics, illegal drugs, steroids or marijuana without a doctor's pres you or anyone else? Includes giving someone else money to purchase them for you or to costs, chip in, etc.	o defr	
4.	Ever used any illegal drugs or narcotics on any job or gone to work under the influence of drug or narcotic?		illegai N
5.	Ever sold any illegal or counterfeit drugs or narcotics on any job or gone to work under the of any illegal drug or narcotic?		luence N
6.	Ever manufactured or cultivated any illegal drug or narcotic, including marijuana?	Y	N
7.	Currently associate with anyone who uses any illegal drug(s) while in your presence?	Y	N
8.	Ever sold or traded anything of value, other than money, to purchase any illegal drugs marijuana?		luding N
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Criminal Events

9.	Ever been placed into Protective Custody for any reason?	Y	N
10.	Ever failed to file an income tax return, federal or state?	Y	N
11.	Ever committed a burglary such as residential, auto or commercial? (Includes entry into any structure, vehicle, watercraft, etc., to commit any theft or other crime.)		lding N
12.	Ever received or sold any property you knew or suspected was stolen?	Y	N
13.	Ever committed any theft, larceny, or shoplifting?	Y	N
14.	Ever committed any homicide or manslaughter, voluntary or involuntary?	Y	N
15.	Ever committed any auto theft, including joy riding?	Y	N
16.	Ever been a suspected in a crime, stopped or detained and questioned in reference to any crim	ne? Y	N
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17.	Ever forged any checks, credit cards, or prescriptions with the purpose to defraud anything to your own personal use?		onven N
18.	Ever been arrested, either as adult or as a juvenile, for any reason, other than traff jurisdiction?		in any N
19.	Ever smuggled any contraband into any jail or correctional facility?	Y	N
20.	Ever committed any aggravated assault or battery against another person?	Y	N
21.	Ever committed any act of physical domestic abuse against another person you were in, ha or are in a relationship with, such as a boyfriend/girlfriend, spouse, or significant of includes any slap, hit, punch, kick, pinch, shove, push, jab, poke, or other serious, painful physical contact for any reason.)	ner? or v	(This
22.	Ever committed any act of bombing or dangerous use of explosives?	Y	N
23.	Ever issued any "No Account" checks? (On any already closed account or on a false account or any other name.)		your N
24.	Ever committed any act of graffiti, vandalism, and/or damage to private or public property, any automobile?		uding N
25.	Ever offered or accepted any bribe for any reason?	Y	N
26.	Ever committed any arson or negligent use of fire (Intentionally set any fire)?	Y	N
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27.	Ever eluded any Police Officer, either on foot or in a vehicle?	Y	N
28.	Ever committed any act of kidnapping, false imprisonment, or custodial interference?	Y	N
29.	Ever counterfeited any money or currency? (Includes copying)	Y	N
30.	Ever made any obscene, harassing, threatening, annoying, intimidating phone calls or bomb threats for any reason?	-	false N
31.	Ever committed any hunting, fishing or boating violations?	Y	N
32.	Ever carried any unlawful deadly weapon into any bar or school other than in the line of dur	_	N
33.	Ever carried any deadly weapon on your person or in your vehicle for your own personal pr	otec Y	
34.	Ever been forces to pay any back taxes or tax penalties for any reason, anywhere, anytime, or personal?	bus Y	
35.	Ever shot at any uninhabited/inhabited dwelling, building, vehicle or at a person, other the line of duty?	an i Y	
36.	Ever impersonated a Police Officer, for any reason?	Y	N
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37	Ever altered or possessed a false identification (I.D.) (Includes driver's license, birth certification).		etc.) N
38	Ever forged another person's signature to any Bill of Sale?	Y	N
39	. Ever obstructed or refused to obey any Police Officer?	Y	N
40	. Ever committed any act of perjury, lying under oath, either in writing or orally, at any criminal case or civil suit?		earing N
41	. Ever failed to return any rental property such as tapes, tools, equipment, or vehicles?	Y	N
42	. Ever made a false Police or Insurance report for any reason?	Y	N
43	Ever been the target or subject of any Grand Jury Investigation?	Y	N
44.	Ever been the subject of any Internal Revenue Service tax audit?	Y	N
45.	Ever knowingly committed any Federal Firearms Violation? (Includes automatic weapons, s armor piercing rounds, etc.)	iler Y	•
46.	Ever committed any act of sabotage or espionage against the United States?	Y	N
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47.	Ever committed any act of extortion, blackmail, or mail fraud?	Y	N
48.	Ever altered any vehicle V.I.N (Vehicle Identification Number) for any reason?	Y	N
49.	Ever falsely obtained any service such as food, utilities, motel, gas, cable TV or garbage paying for it?		ithou N
50.	Ever illegally fired any firearm in any city limit, other than in the line of duty?	Y	N
51.	Ever obtained welfare benefits not entitled to you, such as unemployment, aid for dependent or food stamps?	t ch	
52.	Ever aided or concealed any wanted felon from any Police Agency?	Y	N
53.	Ever been the subject of any restraining order?	Y	N
54.	Ever caused the death of another, either intentionally or unintentionally?	Y	N
55.	Ever been the subject of any arrest warrant? (Juvenile, felony, misdemeanor, etc.)	Y	N
56.	Ever been the subject of any search warrant?	Y	N
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57.	Ever committed any robbery? (Theft from someone using a weapon or any force.)	Y	N
58.	Ever purposely provided any false information to any Police Officer such as a false date false social security number, name, address, phone number, event of crime facts, etc.?		birth N
59.	Other than traffic, have you ever been issued any misdemeanor citation for any reason? Control, Game Warden, Fire Code, Building Code, Tribal Police, etc.)	-	nima N
60.	Ever been required to appear before any Children's or Juvenile court as a defendant for any		son? N
61.	Ever committed any act of embezzlement? (Includes any theft from any employer, includin and merchandise.)	_	noney N
62.	Ever been placed on Court Probation either as an adult or as a juvenile?	Y	N
63.	Ever been, or are you currently on Parole for any reason?	Y	N
64.	Ever been a "lookout" or aided in any illegal act or crime?	Y	N
65.	Ever reported or made a false fire alarm? (Includes pulling a fire alarm.)	Y	N
66.	Ever tampered with any evidence for any reason, in any type of case?	Y	N
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RELATIONSHIP EVENTS

67.	Ever committed any forcible or criminal sex act, other than rape?	Y	N
68.	Ever committed any act of rape or criminal sexual contact of another? (Any sexual int fondling by use of force or implying any weapon.)		rse or N
69.	Ever contributed to the delinquency of any minor by providing any liquor or illegal d having sex with? (Minor means anyone under the age of 18.)		for or N
70.	Ever patronized or procured any prostitute, male or female?	Y	N
71.	Ever committed any act of prostitution? (Performed any sex act for anything of value.)	Y	N
72.	Ever committed any act of indecent exposure, incest or forcible sodomy?	Y	N
7 3.	Ever physically abused or sexually molested any child?	Y	N
74.	Have you at anytime, anywhere, for any reason physically or sexually abused or momentally or physically handicapped or elderly person? (Includes the blind, deaf, etc.).	lested Y	•
RES	in any open window, door, keyhole, etc. by using binoculars, telescope, or committed "peeping tom" at any one undressing or involved in a sexual activity? SPONSE TO QUESTION:	any a Y	
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JOB AND WORK HISTORY

76.	Ever been suspended from any School, High School, Trade School, Community College, Un or Vo-Tech School for any reason?		sity / P
77.	Ever drank any alcoholic beverages during working hours, lunch, or contrary to any Policy?	Y	N
78 .	Ever sued any employer, past or present, in any civil action for any reason?	Y	' I
79.	Ever received counseling, a written reprimand, been suspended or relieved of duty for any reany job you have ever had?		n a
8 0.	Ever been fired from, given the option of resigning or resigned to avoid termination from any	-	? N
81.	Ever refused a security clearance at any job you have worked?	Y	N
82 .	Ever been more than 60 days late in paying any financial responsibility?	Y	N
83.	Ever failed to pay any child support, alimony, or divorce settlement payments?	Y	N
84.	Ever had serious financial difficulties?	Y	N
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MISCELLANEOUS ISSUES

85	. Ever been evicted from any place you have ever lived for any lease violation, failure to pa utilities, etc.? (Includes failing to pay any rent or moving out "in the middle of the night: rent.)	to a	nt o voic
86.	Ever been involved in any type of physical fight in the last three (3) years, outside of the your job duties?	scop	
87.	Ever been a member of or had any gang affiliations other than in the line of duty?	¥	N
88.	Ever committed any animal control violation such as injury, cruelty to, abandonment or deat domestic animal or been issued a citation or written warning for any loose animal, barki animal license violation or any other related animal violation?	ng d	any dog, N
89.	Ever been investigated or sued for any Civil or Federal Rights violations?	Y	N
90.	Ever not passed a polygraph examination you have taken?	Y	N
91.	Ever changed your name or used another person's name for any reason?	Y	N
92.	Do you currently have any prejudices against any specific group of people that you feel you not be able to comfortably work with for any reason?		uld N
93.	Ever violated a court order of any kind or been held in contempt of court for any reason?	Y	N
94.	Ever committed any dishonest act in any police selection process to remain a police candidates as cheating, lying, having another person take a test for you, etc.?		ich N
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95.	Ever attended a cock or dog-fight event?	7	N	ŧ
96.	Have you intentionally omitted any fact or facts from your application or withheld any infrelevant to your application?		ation	
97.	Ever applied to any other Law Enforcement or Corrections Agencies? This includes an State, or Federal Agencies. (Apply means obtaining an initial application, filling it and back.) If you have applied with the City of Las Vegas Police Department before, you must yes.	sene t ans	ding	3
98.	Ever failed any background investigation for any enforcement position or agency?	Y	N	,
99.	Are you currently awaiting any court dates(s) for any citations?	Y	N	
100.	Have you ever been placed on a Pre-Prosecution Program by any Court Official?	Y	N	
101.	Ever altered any serial number or ID marks for any reason?	Y	N	
102.	Ever smuggled, transported, or concealed illegal aliens?	Y	N	
103.	Is there anything else about your background that needs to be revealed or disclosed that relevant to your application?	-	be N	
104.	Have you ever been anywhere for any reason a member of any radical or religious groups?	Y !	N	
105.	Have you ever participated in or encouraged physical or sexual abuse or threatened any pobased solely on their perceived sexual orientation or cultural differences?	erson Y		
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Now that you have completed the Pre-Investigative Questionnaire, take a minute and go back and look over all of the questions. Make sure each question is answered. No single question may be left unanswered.

READ AND SIGN

I have read the Pre-Investigative Questionnaire thoroughly and completely. I understand the questions and have answered truthfully. I agree to this statement of my own free will and have not been subject to any mental or physical force or coercion of any kind.

I am aware that any falsification or omission of any true information made on this questionnaire may cause my name to be removed from the eligibility list, or be the cause of immediate dismissal if any employment has been made. I know and understand what I am doing. I fully understand that an extensive background investigation by the City of Las Vegas Police Department will verify all the information I have provided.

Applicant's Printed Name	
Applicant's Signature	Date